Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

_												
						lumn 2)	SMA TYPI		NTITY	OF		R THAN
TOTAL CLAIMS			13	13				TE	FEE	٦	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		C FEE	<del>                                     </del>		BASIC FE	<del></del>
TOTAL CHARGEABLE CLAIMS			<del>                                     </del>	minus 20=		•				705		170.00
INDEPENDENT CLAIMS			12	<del></del>			×s	<del></del>		OR	X\$18=	<u> </u>
MULTIPLE DEPENDENT CLAIM PI			/				X4	3=	<u> </u>	OR	X86=	ļ
							+14	5=		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in	column 2	TO	AL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II												RTHAN
_	T	(Column 1)	<del></del>	(Column 2) (Co			SM/	LL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q N	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X43	_		1	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	$\dashv$		OR		<del> </del>
								=	·	OR	+290=	
•								TAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)				<del>-</del>		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	E	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		= .	X43:			OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT C	CLAIM		+145	+	<u> </u>	Ì		•
										OR	+290=	
								AL EE		OR ,	TOTAL ODIT. FEE	
_		(Column 1)		(Columr		(Column 3)		•		•		
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	RATE	: <b> </b> ⊤	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	.	=	X\$ 9=			OR	X\$18=	
	Independent		Minus	<del>**</del>	·	=	X43=	十	<del>i</del>	·	X86=	
)	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+-		OR -	×60=	
. 14'	If the entry in column 1 is less than the second								],	OR	+290=	·
II	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL ODIT. FEE	
TI	ne "Highest Numl	ber Previously Paid	For* (Total or	Independent)	iss than ) is the h	3, enter, 3, nighest number i	ADDIT. FE found in the		priate box			